

Quarterly Totals

Demographic Reporting Form Positive Alternatives

Date: 7/1/15-9/30/15

Grantee Name: Women's Life Care Center

1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
0	0	5	28	29	7	11	0

2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown
21	19	15	25	0

3. Client Marital Status:

Married	Not Married	Marital Status Unknown
27	46	7

4. Client Race:

Race: White	Race: African Amer.	Race: African-African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race
18	17	2	5	21	17

5. Client Ethnicity:

Race: Unknown	Hispanic Ethnicity: Yes	Hispanic Ethnicity: No
0	17	63

